BJECT: (Optional)	<u> </u>		EXTENSION	NO.
OM: Plans and Programs	Staff,	, OL	EXTENSION	DATE 2/18/80 S
D: (Officer designation, room number, and illding)	DATE		OFFICER'S	TOWNS (Number each comment to show from whom
	RECEIVED	FORWARDED	INITIALS	to whom. Drow a line ocross column offer each comment,
AC/LSD 3E14 Headquarters				Attached FYI is a copy of a memo received from the Administrator of GSA which
2. The state of th				emphasizes the need for our Agency to achieve a 10 percessayings in automotive fuels
3.				reduction as directed by the
4.				memo is a listing of gasoring saving actions being imple-
5.	-			own motor pool in addition
6.				deem appropriate to reduce fuel consumption.
7.	,			The monthly reporting of vehicle mileage and fuel consumption data requested:
8.	- i	*		will therefore play an important role in measuring
9.				the success or failure of the Agency's efforts in complying with this Presi-
10.			:	dential directive. S
11.	× .			
12.				
13.				
14.				

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FORM 3-62